



HEALTH ADVISORY #67

WV EXPERIENCING EARLY INFLUENZA SEASON

TO: West Virginia Healthcare Providers, Hospitals and other Healthcare Facilities

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DATE: 12/12/12

LOCAL HEALTH DEPARTMENTS: PLEASE DISTRIBUTE TO COMMUNITY HEALTH PROVIDERS, HOSPITAL-BASED PHYSICIANS, INFECTION CONTROL PREVENTIONISTS, LABORATORY DIRECTORS, AND OTHER APPLICABLE PARTNERS

After several mild Influenza seasons since the 2009 H1N1 Pandemic, West Virginia's current surveillance data indicates that flu season has arrived early. Although we know we are having an unusually early season we currently do not have sufficient data to characterize the severity. West Virginia typically does not see influenza activity until late December with a peak in influenza activity around the middle of January through February.

Right now, influenza A H3 viruses have been predominant. Most of the influenza viruses that have been antigenically characterized are well-matched to the 2012-2013 influenza vaccine which would offer good protection. Historically "H3N2 seasons" are more severe, with higher numbers of hospitalizations and deaths.

Recommendations:

- 1) At this time, the primary role of state influenza partners is to recommend that everyone 6 months of age and older get a seasonal flu vaccine.
- 2) The Division of Infectious Disease Epidemiology of the Bureau of Public Health would like to remind influenza partners of the reporting requirements outlined in the West Virginia Reportable Disease Manual (WV Code 16-3-1; 64 CSR7).
 - a) Influenza-like Illness (ILI) defined as fever $\geq 100^{\circ}\text{F}$ (38°C) and cough and/or sore throat without another identified cause: within 1 week to local health department (Numerical totals only).
 - b) Influenza-associated pediatric mortality (age < 18 years): within 1 week to local health department.
 - c) Positive laboratory results for influenza: by type and subtype, as available (RT-PCR, immunofluorescence, or culture only) in aggregate weekly to DIDE via fax (304)-558-8736.
 - d) Outbreaks: immediately to local health departments.
- 3) Sentinel providers and laboratories should continue to test individuals with ILI and utilize the public health lab for characterizing circulating strains, antiviral resistance patterns, and the identification of virus changes.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience.

Categories of Health Alert messages:

Health Alert: Conveys the highest level of importance, warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation. May not require immediate action.

Health Update: Provides updated information regarding an incident or situation. Unlikely to require immediate action.